



Weatherization Assistance Program Application

Notice: Homes that received Weatherization services after September 30, 1994 are not eligible to apply.

Please find your local Weatherization Assistance Program Provider based on your home county. All applications should be submitted directly to your representative office. If you have any questions please contact those same offices at the phone number listed below.

Arapahoe County Community Resources: (303) 636-1982

Arapahoe & Adams

Mail Applications to: **907 Salida Way**
 Aurora, CO 80011

Energy Resource Center: Colorado Springs: (719) 591-0772

Cheyenne, El Paso, Douglas, Elbert, Fremont, Kit Carson, Lincoln, & Teller

Mail Applications to: **540 East Cimarron Street**
 Colorado Springs, CO 80903

Energy Resource Center Denver: (720) 236-1321

Broomfield, Denver, Jefferson, & Gilpin

Mail Applications to: **953 Decatur Street**
 Denver, CO 80204

Energy Resource Center Loveland: (970) 617-2801

Boulder, Larimer, Logan, Morgan, Phillips, Sedwick, Washington, Weld, & Yuma

Mail Applications to: **3543 S. Lincoln Avenue, Suite 2**
 Loveland, CO 80537

Energy Resource Center San Luis Valley: (719) 587-9492

Alamosa, Conejos, Costilla, Mineral, Rio Grande, & Saguache

Mail Applications to: **2311 Commerce Circle**
 Alamosa, CO 81101

Housing Resources of Western Colorado: (970) 241-2871

Archuleta, Delta, Dolores, Gunnison Hinsdale, La Plata, Mesa, Montezuma Montrose, Ouray, San Juan, & San Miguel

Mail Applications to: **524 30 Road, Suite 3**
 Grand Junction, CO 81504

Northwest Colorado Council of Governments: 1(800) 332-3669

Chaffee, Clear Creek, Eagle, Garfield, Grand, Jackson, Lake, Moffat, Park, Pitkin, Rio Blanco, Routt, & Summit

Mail Applications to: **PO Box 2308**
 Silverthorne, CO 80498

Pueblo County Department of Human Services: (719) 583-6110

Baca, Bent, Crowley, Custer, Huerfano, Kiowa, Las Animas, Otero, Prowers, & Pueblo

Mail Applications to: **2631 East 4th St.**
 Pueblo, CO 81001



Applicant Information (Please Print)

Last Name:	First Name:	Middle Initial:
Street Address: (location of home)		Unit # or Manufactured Lot #
City:	County:	Zip:
Primary Phone:	Secondary Phone:	Other Phone:
E-Mail:		
Mailing Address - If different from street address	City:	Zip:

Utility Information

Natural Gas or Propane Provider: _____	Account #: _____
Electric Provider: _____	Account #: _____

Qualification Information

Option 1: Qualify through Public Assistance:
If you, or any member of your household, currently receive any of the following forms of public assistance, you may pre-qualify and verification of income is not necessary. However, you still must submit a valid approval letter with this application. Check all that apply:

☐ TANF ☐ AND ☐ SSI ☐ SNAP

OR

Option 2: Qualify through Household Income Verification:
List all household income below and submit pay stubs or other verification for each income source for the past 3 months. Income documentation must be included for each household member with an income. Income is defined as money received from the following sources (check all that apply):

☐ Job income ☐ Social Security ☐ Retirement ☐ Disability ☐ Spousal Support (alimony)
☐ Workers' Compensation ☐ Unemployment ☐ Self-employment ☐ Other _____

Household Information (please list all people living in your household, including yourself; attach additional sheet if necessary)

Name	Age	Has a Disability?	Native American?	Gross Monthly Income*	Income Source(s)*

*Gross Monthly Income and Income Source columns are only required if applicant is qualified for Weatherization via Option 2: Household Income Verification, as stated above.



Lawful Presence Affidavit

I, _____, swear or affirm under penalty of perjury under the laws of the State of Colorado that: (check one)

___ I am a United States citizen, or

___ I am a Permanent Resident of the United States, or

___ I am lawfully present in the United States pursuant to Federal law.

I understand that this sworn statement is required by law because I have applied for a public benefit. I understand that state law requires me to provide proof that I am lawfully present in the United States prior to receipt of this public benefit. I further acknowledge that making a false, fictitious, or fraudulent statement or representation in this sworn affidavit is punishable under the criminal laws of Colorado as perjury in the second degree under Colorado Revised Statute 18-8-503 and it shall constitute a separate criminal offense each time a public benefit is fraudulently received.

Applicant Signature _____ **Date** _____

Applicants must send a copy of current picture identification with application. Acceptable forms of identification include:

- A valid Colorado driver's license or a valid Colorado identification card
- A valid United States military card/Common Access Card
- A valid United States Coast Guard Merchant Mariner card
- A Native American tribal document
- A valid United States passport
- If you do not possess any of the above documents, your local Weatherization agency can provide you with a list of additional documents which are accepted for verifying lawful presence.



Description of Home

Do you own or rent your home? ☐ Own ☐ Rent*

**If you rent your home, your landlord must complete the permission form on page 4.*

Type of home:

House (select one type): ☐ Ranch style (one level) ☐ Bi-Level ☐ Tri-level ☐ House divided into 2 units ☐ Duplex

Manufactured Home (select one type): ☐ Singlewide ☐ Doublewide

Other (select one type): ☐ Townhouse ☐ Apartment ☐ Condo ☐ Multiplex ☐ Cabin ☐ Modular

Home features: ☐ Finished basement ☐ Unfinished basement ☐ Crawlspace ☐ Pitched roof ☐ Flat roof
☐ Has an Addition ☐ In a Manufactured Home Park

What year was the home built? _____ How long have you lived in the home? _____

Heating System: (check all that apply)

Type: ☐ Forced Air ☐ Boiler ☐ Electric Baseboard ☐ Fireplace/Stove
☐ Wall Furnace ☐ Space Heater ☐ Floor/Gravity ☐ No furnace ☐ Other: _____

Fuel: ☐ Natural Gas ☐ Propane ☐ Electricity ☐ Wood ☐ Other: _____

Location: ☐ Basement ☐ Attic ☐ Crawlspace ☐ Wall ☐ Floor ☐ Other: _____

Cooling System: (check all that apply) ☐ Central Air ☐ Window A/C ☐ Swamp Cooler ☐ None

Exterior: (check all that apply) ☐ Brick ☐ Wood ☐ Stucco ☐ Vinyl ☐ Aluminum ☐ Other: _____

Appliances: Hot Water Heater Type: ☐ Natural Gas ☐ Propane ☐ Electric ☐ Solar
Cooking Appliance Type: ☐ Natural Gas ☐ Propane ☐ Electric ☐ Combination

Additional Home Details:

- Is the home for sale or likely to be put up for sale in the near future? ☐ Yes ☐ No
- Are you currently remodeling or doing construction on any part of your home? ☐ Yes ☐ No
If yes, please list: _____
- Does your home have broadband internet? ☐ Yes ☐ No
- Is anyone in the household on oxygen? ☐ Yes ☐ No
- Does anyone in the household have allergies or hyper-sensitivities to dust, fiberglass, cellulose, mold, latex, or common building materials? ☐ Yes ☐ No
If yes, please list: _____

Home Access Authorization

Access to your home: Do you agree to and understand that Colorado weatherization technicians and contractors must be given access to **all rooms** in your home during business hours and on a reasonable schedule for any work to proceed? Please note that a State Quality Assurance Inspector may also return within one year of work completion to inspect the work, including all safety and diagnostic testing. ☐ I agree

Permission to photograph home: Do you agree to allow Colorado weatherization technicians and contractors and its designees to photograph the unit for pre and post-work documentation? Photographs and any identifying information will be kept private. ☐ I agree

Before weatherization work can begin, the home must meet a **minimum standard of housekeeping**. Do you agree to and understand that work areas (specifically areas around heating systems, attic and crawlspace accesses and exterior doors and windows) are to be free of debris, clutter, and pets and be reasonably hygienic where work is to be completed? ☐ I agree ☐ All of the members of my household have a disability that prevents agreement.*
**Reasonable accommodations may be made for households with disabilities.*

Applicant Signature _____ **Date** _____



To the LANDLORD or PROPERTY MANAGER:

Unit Address: _____ Applicant Name: _____

Your tenant is applying for weatherization services provided by the Colorado Energy Office Weatherization Assistance Program (CEO WAP). If the application is approved, they will be eligible to receive free energy efficiency services that will help them save money on their energy bills and make their unit more comfortable and safe. Weatherization services include an energy audit and safety diagnostics of the home. The energy audit will determine what energy savings measures can be provided to the tenant at no charge. These free measures may include additional attic insulation, wall insulation, crawl space/floor insulation, air sealing, storm windows, ventilation, and furnace or hot water heater repairs. **In multifamily housing (between 2-4 units), if the energy audit reveals the need for heating system replacement or identifies a highly inefficient refrigerator, the program will seek matching funds from you, the landlord.** Because this program is federally-funded and focused on serving low-income households, the typical cost to the landlord for replacement of heating systems or refrigerators is significantly less than 50% of market rate. In these cases you will be presented with all options before moving forward.

Additionally, in order to provide the maximum improvement in comfort, energy savings, and safety, the CEO WAP assesses all areas of the home that could be improved. In some cases, making these improvements to the home can be moderately invasive. For instance, if the walls of the home lack adequate insulation, the weatherization crew may be able to retrofit the walls with insulation, which would require drilling holes through the interior or exterior wall surface. Once insulation is installed, the holes are plugged and patched with spackle or drywall compound as close to the original texture as possible. In some cases the patch may remain somewhat visible. While every effort will be made to blend the patches, extensive drywall repair, wallpapering, or custom texturing cannot be provided. Examples of other measures that may be moderately invasive include ceiling insulation, furnace replacement, and air sealing. Similar to wall insulation, these measures may involve cutting into interior or exterior wall surfaces and may leave behind visual evidence of such.

The goal of the CEO WAP is to provide maximum improvements to comfort, energy savings, and safety. All measures that are deemed cost-effective for your home are strongly encouraged, however, you do have the right to decline certain measures for aesthetic or other reasons. Please be aware that due to the design of the program and federal requirements, if you decline some measures, other measures may no longer be available to you.

If you have concerns about how these measures might impact your property, please indicate below:

- ☐ I give my consent and I have no concerns about the CEO WAP serving my property.
- ☐ I have concerns about the heating system and/or refrigerator repair or replacement.
- ☐ I give my consent, but have concerns about: _____
- ☐ I do not give my consent for the CEO WAP to serve my property.

The refrigerator in the property is owned by the: ☐ Tenant ☐ Landlord

I have read and understand the terms and conditions presented herein, and except for the conditions above, grant permission to perform such weatherization measures as may be suited to this property under the CEO WAP standards. I also certify that the property is not presently for sale, nor is it designated for acquisition or clearance (foreclosure) by a federal, state, or local program. In addition, I agree that rent shall not be raised due solely to the increased value weatherization provides to the dwelling unit. I hereby release and pledge to defend and indemnify CEO WAP, its employees, agents, and independent contractors involved from any liability or loss in connection with the performance of weatherization assistance or any act or eventuality arising from this work.

Landlord Name and Landlord Mailing Address

Landlord Primary Phone #

Landlord Other Phone #

Landlord Email Address

Landlord Signature and Date



To the HOMEOWNER / TENANT:

In order to provide the maximum improvement in comfort, energy savings, and safety, the Colorado Energy Office Weatherization Program (CEO WAP) assesses all areas of your home that could be improved. In some cases, making these improvements to your home can be moderately invasive. For instance, if the walls of your home lack adequate insulation, the weatherization crew may be able to retrofit the walls with insulation, which would require drilling holes through the interior or exterior wall surface. Once insulation is installed, the holes are plugged and patched with spackle or drywall compound as close to the original texture as possible. In some cases the patch may remain somewhat visible. While every effort will be made to blend the patches, extensive drywall repair, wallpapering, or custom texturing cannot be provided.

Other comfort, energy-saving, and safety measures that may be moderately invasive include ceiling insulation, furnace replacement, and air sealing. Similar to wall insulation, these measures may involve cutting into interior or exterior wall surfaces and may leave behind visual evidence of such.

The goal of the CEO WAP is to provide maximum improvements to comfort, energy savings, and safety. All measures that are deemed cost-effective for your home are strongly encouraged, however, you do have the right to decline certain measures for aesthetic or other reasons. Please be aware that due to the design of the program and federal requirements, if you decline some measures, other measures may no longer be available to you.

If you have concerns about how these measures might impact your home, please indicate below and discuss these concerns with the energy auditor*:

- ☐ I have no concerns about the Weatherization Program serving my home.
- ☐ I have concerns about wall insulation.
- ☐ I have concerns about ceiling or attic insulation.
- ☐ I have concerns about: _____

I have read and understand the terms and conditions presented herein, and except for the conditions above, grant permission to perform such weatherization measures as may be suited to this property under the CEO WAP standards. I also certify that the home to be weatherized is not presently for sale, nor is it designated for acquisition or clearance (foreclosure) by a federal, state, or local program. I hereby release and pledge to defend and indemnify CEO WAP, its employees, agents, and independent contractors involved from any liability or loss in connection with the performance of weatherization assistance or any act or eventuality arising from this work.

Applicant Signature _____ **Date** _____

**For Tenants: Permission granted by the Landlord represents the final decision related to weatherization concerns.*

Client complaints regarding the rent being raised solely due to the increased value of weatherization upgrades to the dwelling unit, should be directed to 303-866-2100.



Please Read This Section Carefully:

My signature below authorizes Colorado weatherization staff and crew to enter my home as needed to perform weatherization work. My signature verifies this residence is not currently for sale, nor is it designated for acquisition or clearance (foreclosure) by federal, state or local programs. Upon completion of work, I give permission for the contractor, sub-contractor staff, local, state, and federal officials to inspect said work. My signature below authorizes the Colorado Energy Office Weatherization Program (CEO WAP) and its designees to inspect heating, fuel usage and utility billing records for up to five years before and after completion of weatherization work and authorize pertinent utility and fuel companies to make such records available to them solely for obtaining data for evaluation of subsequent energy conservation effectiveness.

I agree, on behalf and for all who stand in my stead, that the CEO, its subgrantees and weatherization crews will not be held liable for any injury or expense incurred by me while participating in this program. I attest to the best of my knowledge that the information on this form is correct and complete. This service is free of charge but if my home is served due to incomplete or incorrect information that would otherwise make my household ineligible, I accept responsibility for paying for services received. I authorize the release of income and benefits information to the CEO WAP to document my eligibility. Pursuant to 5 U.S.C. 552(b)(6), of the Freedom of Information Act, the CEO WAP is required to keep confidential any specifically identifying information related to an individual's eligibility application for weatherization services, or the individual's participation in weatherization services, such as name, address, or income information. The State of Colorado in conjunction with the CEO may, however, release information about recipients in the aggregate in a manner which does not identify specific individuals.

Appeal Process: Once you have completed the application, you have the right for your application to be processed within 30 days. If your application is not processed within 30 days or if you are denied services, you may appeal the decision using the following appeals procedure: You may appeal to the Program Manager or Executive Director of the local weatherization agency. The Program Manager or Executive Director will issue a decision in a written letter within 15 days receipt of the notice of appeal. If the Program Manager or Executive Director denies services and you still are in disagreement, you have 15 days after receiving the written notification by the Program Manager or Executive Director to appeal to the Colorado Energy Office Weatherization Program (CEO WAP). Appeals to the CEO WAP should be in writing and addressed to: Colorado Energy Office Weatherization Program, 1600 Broadway, Suite 1960, Denver, CO 80202 The CEO WAP will have 15 days to respond in writing to all appeals and the decision will be considered final. My signature below indicates that I have read, understood and agree to the conditions of this application.

Applicant Signature _____ **Date** _____

How did you hear about the weatherization program? (check all that apply)

<input type="checkbox"/>	LEAP	<input type="checkbox"/>	Utility Company	<input type="checkbox"/>	Newspaper
<input type="checkbox"/>	Social Services Office	<input type="checkbox"/>	Brochure	<input type="checkbox"/>	Television
<input type="checkbox"/>	Heat Help Line	<input type="checkbox"/>	Friend/ Family Member	<input type="checkbox"/>	Radio
<input type="checkbox"/>	2-1-1	<input type="checkbox"/>	Bus ad/Billboard	<input type="checkbox"/>	Other:

[Do Not Write Below - For Office Use Only]

I certify that this client is eligible under the appropriate funding guidelines.

☐ Unit WAS weatherized in _____

☐ Unit has *NOT* been previously Weatherized

Authorized CEO WAP Agent

Date Approved

Income Verification

POV Level%

HHN or Qualifying Program

Date Eligibility Expires

Job #